2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N0400005686

FILED Oct 01, 2009 Secretary of State

Entity Name: MIAMI FOREST VILLAS CONDOMINIUM ASSOCIATION, INC.

New Principal Place of Business: Current Principal Place of Business: 954-956 S W 36TH CT MIAMI, FL 33135 **Current Mailing Address: New Mailing Address:** 954 S.W. 36 CT MIAMI, FL 33135 FEI Number: 16-1676675 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BECKER & POLIAKOFF, P.A. 121 ALHAMBRA PLAZA 10TH FLOOR MIAMI, FL 33134 US The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE: BECKER & POLIAKOFF, P.A. Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete GIMON, PEDRO L Name: Name: Address: 954 SW 36TH CT #403 Address: City-St-Zip: MIAMI, FL 33135 City-St-Zip: Title: () Delete Title: () Change () Addition Name: EFREN, MORELL Name: Address: 954 S.W. 36TH CT. #503 Address: City-St-Zip: MIAMI, FL 33135 City-St-Zip: Title: () Delete Title: () Change () Addition CHAVEZ, WILLIAM Name: Name: 954 S.W. 36TH CT. #303 Address: Address: City-St-Zip: MIAMI, FL 33135 City-St-Zip: Title: () Delete Title: () Change () Addition SANTIAGO, DENISE Name: Name: Address: 954 S.W. 36TH CT. #203 Address: City-St-Zip: MIAMI, FL 33135 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DENISE SANTIAGO Т 10/01/2009